



## Department of State

Corporate Filings  
312 Eighth Avenue North  
6th Floor, William R. Snodgrass Tower  
Nashville, TN 37243

For Office Use Only

### APPLICATION FOR CERTIFICATE OF AUTHORITY (NONPROFIT)

Pursuant to the provisions of Section 48-65-103 of the Tennessee Nonprofit Corporation Act, the undersigned corporation hereby applies for a certificate of authority to transact business or conduct affairs in the State of Tennessee, and for that purpose sets forth:

1. The name of the corporation is \_\_\_\_\_  
\*If different, the name under which the certificate of authority is to be obtained is \_\_\_\_\_

[NOTES: The Secretary of State of the State of Tennessee may not issue a certificate of authority to a nonprofit foreign corporation if its name does not comply with the requirements of §48-54-101 of the Tennessee Nonprofit Corporation Act. \*If obtaining a certificate of authority under a different corporate name, this application must be accompanied by an application for registration of assumed corporate name filed pursuant to §48-54-101(d) with an additional \$20.00 fee.]

2. The state or country under whose law it is incorporated is \_\_\_\_\_

3. The date of its incorporation is \_\_\_\_\_ (must be month, day, and year), and the period of duration, if other than perpetual, is \_\_\_\_\_.

4. The complete street address (including zip code) of its principal office is \_\_\_\_\_

Street City State/Country Zip Code

5. The complete street address (including the county and the zip code) of its registered office in Tennessee and the name of its registered agent at that office is:

Street City County Zip Code

Registered agent \_\_\_\_\_

6. The names and complete business addresses (including zip code) of its current officers are: (Attach separate sheet if necessary.)

\_\_\_\_\_  
\_\_\_\_\_

7. The names and complete business addresses (including zip code) of its current board of directors are: (Attach separate sheet if necessary.)

\_\_\_\_\_  
\_\_\_\_\_

8. If the corporation commenced doing business in Tennessee prior to the approval of this application, the date of commencement (month, day, and year) \_\_\_\_\_.

9. ☐ The corporation has members. ☐ The corporation has no members. [NOTE: Please mark the applicable statement]

10. The corporation is a nonprofit corporation.

11. If the corporation had been incorporated in Tennessee, it would be ☐ a public benefit corporation, or ☐ a mutual benefit corporation. [NOTE: Please mark the applicable statement.]

12. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/time is \_\_\_\_\_ (date), \_\_\_\_\_ (time).

[NOTE: A delayed effective date shall not be later than the 90th day after the date this document is filed by the Secretary of State.]

[NOTE: This application must be accompanied by a certificate of existence or a document of similar import (for example, a certificate of good standing) duly authenticated by the Secretary of State or other official having custody of corporate records in the state or country under whose law it is incorporated. The certificate shall not bear a date of more than two (2) months prior to the date the application is successfully filed in Tennessee.]

Signature Date

Name of Corporation

Signer's Capacity

Signature

Name (typed or printed)